

- \* **FAST SERVICE**  
It is our policy to ship within 6 working days following our receipt of your order.
- \* **SMALL QUANTITIES**  
Order as few as 500 forms imprinted with your firm name and address.
- \* **LOW PRICES**  
Made possible by our National Sales Volume.
- \* **PHONE TOLL FREE**  
1 + 800-225-6380  
Mass. residents  
1 + 800-252-9226
- \* **MONEY-BACK GUARANTEE**



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# continuous **BUSINESS FORMS**

for  
**SMALL  
COMPUTERS**

• ALL PURPOSE CHECKS • STATEMENTS • INVOICES • PAYROLL CHECKS •



# FAST SERVICE . . . LOW PRICES

Over 1/2 million business firms  
save by purchasing from NEBS.

## NEBS LOW PRICES — NO HIDDEN EXTRAS

No shipping charges on prepaid orders.  
No handling charges.  
No extra charge for printing standard heading.  
No extra charge for MICR coding or  
consecutive numbering.

## NEBS FAST SERVICE

It is our policy to ship within 6 working days  
following our receipt of your order.

## CONVENIENT TERMS

**CASH WITH ORDER** — We will pay regular  
surface shipping charges. Massachusetts and  
Missouri customers add sales tax.

**OPEN ACCOUNT** — Net 7 days, shipping  
charges added to your invoice.

**NEW ACCOUNTS** — Prepayment will speed  
your order through our Credit Department  
(and save shipping charges).

**NO C.O.D.** Orders please.

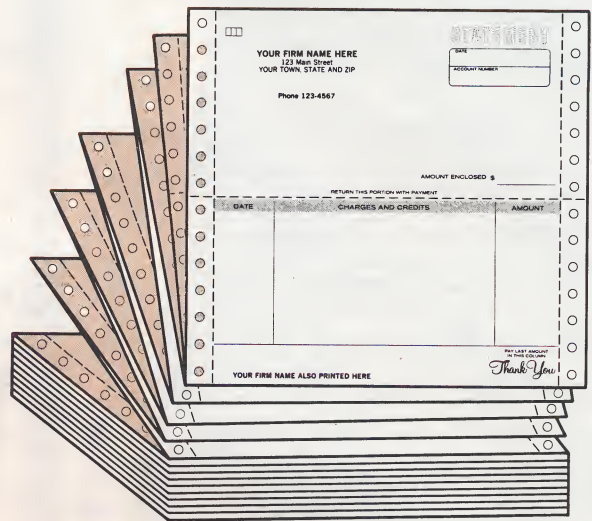
## EFFICIENT DELIVERY

For speed and economy, we ship by UPS®  
whenever possible. Please supply street  
address when ordering.

## MONEY BACK GUARANTEE

If for any reason you are not completely  
satisfied, your money will be promptly  
refunded, including any transportation charges  
you may have paid.

UPS® is a registered trademark of United Parcel Service of America, Inc.



**NOTE:** All NEBS continuous forms are  
supplied fan folded. All are designed for 10  
characters-per-inch, 6 lines per inch spacing.

## ORDER BY MAIL

1. Use the Fast Service Order Form with  
Postpaid Order Envelope supplied.
2. Fill in all necessary information. When  
ordering checks simply write "VOID"  
across sample of check you are now using  
(be sure wording is up-to-date) and  
enclose. For new bank accounts secure  
a MICR encoding form from your bank.
3. Please send a sample from a previous  
order so we can duplicate the heading.

## OR PHONE TOLL FREE 1 + 800-225-6380

(Massachusetts customers 1 + 800-252-9226)  
These lines are open from 8 a.m. to 8 p.m.,  
Eastern time Monday through Friday.



NEW ENGLAND BUSINESS SERVICE, INC.  
NORTH MAIN ST., GROTON, MASS. 01450



# continuous ALL-PURPOSE CHECKS

**Reduce payment errors** — voucher section provides space to show how net amount was calculated. Assures your account will be properly credited.

**Software compatible** — Product 9020 with Apple GBS 1 and others; Product 9021 with Durango F-85 and others.

**Saves time** — duplicate sets have carbons in position, ready-to-use — one printing provides checks and an exact record of payment.

**Low cost** — prices include printing your firm name and address, your bank's name and number, consecutive numbering and MICR encoding.

**Maximum security** — both check and voucher are preprinted with the same consecutive numbers, plus space for computer control numbers.

**Product 9020 and 9021** — Size 8½"x 7" detached. Check size 8½"x 3½". Prices include printing your firm name, address, consecutive numbering, MICR encoding, bank name, address and number. Attractive brown fine line on white stock. Available in single (white) or duplicate (white, canary) continuous sets.

QUANTITY	SINGLE Product 9020-1 or 9021-1
6,000	\$135.00
4,000	99.00
2,000	59.95
1,000	39.95
500	29.95
QUANTITY	DUPLICATE Product 9020-2 or 9021-2
6,000	\$230.00
4,000	165.00
2,000	95.00
1,000	59.00
500	39.95
QUANTITY	Product 775 DU-O-VUE® Envelopes
6,000	\$119.00
4,000	83.00
2,000	45.00
1,000	24.95
500	14.95

YOUR FIRM NAME HERE

CHECK No 1001

DATE	DESCRIPTION	AMOUNT	DEDUCTION	NET AMOUNT
Product 9020				

CHECK DATE CONTROL NUMBER TOTALS

---

YOUR FIRM NAME HERE  
123 MAIN STREET  
YOUR TOWN, STATE and ZIP

YOUR BANK NAME HERE  
CITY, STATE and ZIP  
12-308  
1123

CHECK No 1001

PAY TO THE ORDER OF

DATE CONTROL NO AMOUNT

AUTHORIZED SIGNATURE

⑆112303080⑆ 78 9123⑆

YOUR FIRM NAME HERE  
123 MAIN STREET  
YOUR TOWN, STATE and ZIP

YOUR BANK NAME HERE  
CITY, STATE and ZIP  
12-308  
1123

CHECK No 1001

PAY TO THE ORDER OF

DATE CONTROL NO AMOUNT

AUTHORIZED SIGNATURE

⑆112303080⑆ 78 9123⑆

**ELIMINATES ENVELOPE ADDRESSING**  
Assures privacy, checks are designed for use in Product 775 DU-O-VUE® Envelopes (3½"x 8½"). Made of opaque gray stock.

YOUR FIRM NAME HERE

CHECK No 1001

OUR REF. NO.	YOUR INVOICE NO.	INVOICE DATE	INVOICE AMOUNT	AMOUNT PAID	DISCOUNT TAKEN	NET CHECK AMOUNT
Product 9021						

YOUR FIRM NAME HERE  
123 MAIN STREET  
YOUR TOWN, STATE and ZIP

YOUR BANK NAME HERE  
CITY, STATE and ZIP  
12-308  
1123

CHECK No 1001

PAY TO THE ORDER OF

DATE CONTROL NO AMOUNT

AUTHORIZED SIGNATURE

⑆112303080⑆ 78 9123⑆

YOUR FIRM NAME HERE  
123 MAIN STREET  
YOUR TOWN, STATE and ZIP

YOUR BANK NAME HERE  
CITY, STATE and ZIP  
12-308  
1123

CHECK No 1001

PAY TO THE ORDER OF

DATE CONTROL NO AMOUNT

AUTHORIZED SIGNATURE

⑆112303080⑆ 78 9123⑆

**ELIMINATES ENVELOPE ADDRESSING**  
Assures privacy, checks are designed for use in Product 775 DU-O-VUE® Envelope (3½"x 8½"). Made of opaque gray stock.

• ALL PURPOSE CHECKS • STATEMENTS • INVOICES • PAYROLL CHECKS •



# CONTINUOUS STATEMENTS

**Universal design** – provides up to sixteen lines (41 characters each) to list charges and credits. Space beneath form body provides for two line sales message or account aging.

**Helps control accounts receivable** — perforated so top section can be detached by customer and returned with check. Provides positive identification of incoming payments.

**Software compatible** — with Apple "Controller" GBS 1 and other systems.

**Saves addressing time** — designed for use in companion Product 772 DU-O-VUE® Envelope.

**Simplifies paperwork** — duplicate sets have “carbonless” paper to produce clean, clear copies without messy carbons to handle.

**Product 9060** —Size 6½"x7" detached. Prices include your firm name, address and phone in top section, plus your name only in lower section. Printed in black ink. Available in single (white) or duplicate (white, canary) continuous sets.

QUANTITY	SINGLE Product 9060-1	DUPLICATE Product 9060-2	Product 772 DU-O-VUE® Envelopes
10,000	\$120.00	\$255.00	\$130.00
6,000	75.00	168.00	87.00
4,000	57.00	125.00	60.95
2,000	32.95	69.95	34.25
1,000	19.95	39.95	19.50
500	14.95	24.95	11.50

# STATEMENT

DATE

ACCOUNT NUMBER

**YOUR FIRM NAME HERE**  
 123 Main Street  
 YOUR TOWN, STATE AND ZIP

Phone 123-4567

AMOUNT ENCLOSED \$ \_\_\_\_\_

RETURN THIS PORTION WITH PAYMENT

DATE	CHARGES AND CREDITS	AMOUNT

**YOUR FIRM NAME ALSO PRINTED HERE**

PAY LAST AMOUNT  
IN THIS COLUMN

Thank You

YOUR FIRM NAME HERE  
123 Main Street  
YOUR TOWN, STATE AND ZIP

Monaghan Insurance Agency  
35 Palm Street  
Tuxedo, Illinois 61460

**SPEED COLLECTIONS**  
**Product 772 DU-O-VUE®**  
**(3 $\frac{5}{8}$ " x 6 $\frac{7}{8}$ " ) eliminates**  
**envelope addressing.**

# 'carbonless' (11" x 8½") CONTINUOUS STATEMENTS

**Prevents Misunderstandings**  
perforated so right side can be detached by customer and returned with check. Check column lets customer indicate items being paid.

**Software Compatible** — with Durango F-85 and other systems.

**Large Size** — provides up to 20 lines to list charges and credits.

**Easy-to-use** — duplicate sets have “carbonless” paper, eliminate need for messy carbons.

**Product 9061** — Size 11"x 8½" detached. Prices include your firm name, address and phone at top left, plus your name only at lower right. Printed in black ink. Available in single (white) or duplicate (white, canary) continuous sets.

QTY.	SINGLE Product 9061-1	DUPLICATE Product 9061-2
10,000	\$235.00	\$455.00
6,000	155.00	298.00
4,000	115.00	225.00
2,000	67.50	125.00
1,000	42.50	74.95
500	29.95	47.50

**Product 741-1**  
**SIZE 10 Window Envelopes**

10,000	—	\$175.00
6,000	—	115.00
4,000	—	88.00
2,000	—	49.95
1,000	—	28.95
500	—	18.50

YOUR FIRM NAME HERE 123 Main Street YOUR TOWN, STATE and ZIP Phone 123-4567	STATEMENT		To insure proper credit please check those items being paid in the "✓" column and return this portion of the statement with your payment.
	STATEMENT DATE	ACCOUNT NO.	
	Items after this date will appear on your next statement.		Please refer to this account number when making inquiries.
	STATEMENT DATE	ACCOUNT NO.	
REFERENCE	DATE	CODE	DESCRIPTION
			AMOUNT
			BALANCE
			REFERENCE
			CODE
			AMOUNT
			✓
CODES I - INVOICE    P - PAYMENT    F - FINANCE C - CR MEMO   A - DISCOUNT   CHARGE D - DR MEMO   ALLOWED			PLEASE PAY
			TOTAL
			YOUR FIRM NAME HERE

**YOUR FIRM NAME HERE**  
 10-9865-7001  
 U.S. EASY COPY AND ST.

MERRIMACK INSURANCE COMPANY  
 14 Main Street  
 Merrimack, N.H. 03001

**SAVES ADDRESSING TIME**  
— Product 9061 is designed for use in Product 741-1 window envelope (4 1/8" x 9 1/2"). Prices include your heading.



YOUR FIRM NAME HERE  
123 Main Street  
YOUR TOWN, STATE AND ZIP

Phone 123-4567

TO

SALESPERSON DATE OF INVOICE

SHIP TO

ACCOUNT NO. DATE SHIPPED SHIPPED VIA COL PR F.O.B. POINT TERMS YOUR ORDER NUMBER

QUANTITY DESCRIPTION UNIT PRICE AMOUNT

Thank You

ORIGINAL

TOTAL

YOUR FIRM NAME HERE  
123 Main Street  
YOUR TOWN, STATE AND ZIP

YOUR FIRM NAME HERE  
123 Main Street  
YOUR TOWN, STATE AND ZIP

**SAVES ADDRESSING TIME**  
Product 771 DU-O-VUE®  
Envelope (4 1/4" x 9").

YOUR FIRM NAME HERE  
123 Main Street  
YOUR TOWN, STATE AND ZIP  
Phone 123-4567

INVOICE NO.

SHIP TO

SOLD TO

ACCOUNT NO. SALESMAN NO. PURCHASE ORDER NO. SHIP VIA COL PPD DATE SHIPPED TERMS INVOICE DATE PAGE

QTY. ORDERED QTY. SHIPPED QTY. BACK ORDERED ITEM NO. DESCRIPTION UNIT PRICE DISC % EXTENDED PRICE

Thank You

SALE AMOUNT

MISC. CHARGES  
SALES TAX  
FREIGHT

TOTAL

## "carbonless" (8 1/2" x 7") CONTINUOUS INVOICES

**Fast, easy-to-use** — no carbons to handle, insert or dispose of. Align first set to register marks, all subsequent sets are in perfect registration.

**Low cost** — prices include the printing of your firm name and address, looks and is business like.

**Software compatible** — with Apple "CASHIER" and other systems.

**Spaces for complete shipping instructions** — with shipping date, name of carrier and F.O.B. point, etc.

**Last copy of 5 part sets is a Packing List** — "Unit Price" and "Total" columns are blocked out.

**Product 9040** — Size 8 1/2" x 7" detached. Prices include printing your heading in black ink. Available in 2, 3, 4, and 5 part continuous sets. (Paper color sequence: white, canary, pink, goldenrod, white.)

Quantity	2 PART Product 9040-2	3 PART Product 9040-3	4 PART Product 9040-4	5 PART Product 9040-5
6,000	\$198.00	\$298.00	\$375.00	\$465.00
4,000	149.00	225.00	275.00	335.00
2,000	84.00	129.00	159.00	195.00
1,000	49.95	69.95	95.00	115.00
500	32.50	42.50	57.00	69.95

Product 771 DU-O-VUE® Envelopes				
6,000	4,000	2,000	1,000	500
\$102.00	\$71.50	\$37.50	\$20.95	\$12.50

## "carbonless" (8 1/2" x 11") CONTINUOUS INVOICES

**Large invoices** — provide up to 33 lines of items and descriptions.

**Software compatible** — with Durango F-85 and other systems.

**Includes packing list** — last copy of 5-part sets has "Unit Price" and "Total" columns blocked out.

**Product 9041** — Size 8 1/2" x 11" detached. Prices include printing your heading in black ink. Available in 2, 3, 4, and 5 part continuous sets. (Paper color sequence: white, canary, pink, goldenrod, white.)

Quantity	2 PART Product 9041-2	3 PART Product 9041-3	4 PART Product 9041-4	5 PART Product 9041-5
6,000	\$310.00	\$445.00	\$585.00	\$695.00
4,000	235.00	325.00	425.00	495.00
2,000	132.00	187.00	249.00	295.00
1,000	78.00	110.00	149.00	175.00
500	49.95	69.95	87.50	105.00

Product 741-1, SIZE 10 Window Envelopes				
6,000	4,000	2,000	1,000	500
\$115.00	\$88.00	\$49.95	\$28.95	\$18.50

YOUR FIRM NAME HERE  
123 Main Street  
YOUR TOWN, STATE AND ZIP

SALES TAX

SALES TAX

**SAVES ADDRESSING TIME**  
Product 9041 is designed for use in Product 741-1 window envelope (4 1/4" x 9 1/2"). Prices include your heading.



YOUR FIRM NAME HERE CHECK N<sup>o</sup> 1001

HOURS		RATE	REGULAR EARNINGS	OVERTIME EARNINGS	OTHER PAY		GROSS	PERIOD ENDING
REGULAR	OVERTIME			UNITS	RATE	AMOUNT		
								TOTAL GROSS
DEDUCTIONS								CONTROL NUMBER
F.I.C.A.	FED. W/H	STATE W/H	Product 9000-1					TOTAL DEDUCTIONS
EMPLOYEE'S NAME AND SOC. SEC. NO.								NET PAY

YOUR FIRM NAME HERE  
123 MAIN STREET  
YOUR TOWN, STATE and ZIP

YOUR BANK NAME HERE  
CITY, STATE and ZIP  
12-308  
1123

CHECK N<sup>o</sup> 1001

PAY TO THE ORDER OF DATE CONTROL NO AMOUNT

AUTHORIZED SIGNATURE

⑆112303080⑆ 78 9123⑈

YOUR FIRM NAME HERE  
123 Main Street  
Your Town, State and Zip

James J. Colburn  
28 Maple St.  
Salem, Mass. 01970

**ELIMINATES ENVELOPE ADDRESSING**  
Assures privacy, checks are designed for use in Product 775 DU-O-VUE® Envelopes (3 5/8" x 8 5/8"). Made of opaque gray stock.

YOUR FIRM NAME HERE CHECK

EMPLOYEE NUMBER	HOURS				EARNINGS				GROSS PAY
	REGULAR	OVERTIME	HOLIDAY	SPECIAL	REGULAR	VACATION	SICK		
SOCIAL SECURITY NUMBER	VACATION	SICK	TOTAL HOURS	OVERTIME	HOLIDAY	SPECIAL			
TAXES				DEDUCTIONS					
FICA	STATE WITH	CITY WITH	SAV BOND	LOAN				TOTAL DEDUCTIONS	
FEDERAL WITH	STATE	TOTAL TAXES	SAV ACCT				TOTAL DEDUCTED TAXES		
YEAR TO DATE								PAY PERIOD	
GROSS	FICA	FED WITH TAX	STATE WITH TAX	STATE TAX	CITY WITH TAX	NET PAY			

Product 9001-1

YOUR FIRM NAME HERE  
123 MAIN STREET  
YOUR TOWN, STATE and ZIP

YOUR BANK NAME HERE  
CITY, STATE and ZIP  
12-308  
1123

DATE CHECK N<sup>o</sup> 1001

AMOUNT

AUTHORIZED SIGNATURE

⑆112303080⑆ 78 9123⑈

YOUR FIRM NAME HERE  
123 Main Street  
Your Town, State and Zip

James J. Colburn  
28 Maple St.  
Salem, Mass. 01970

**ELIMINATES ENVELOPE ADDRESSING**  
Assures privacy, checks are designed for use in Product 775 DU-O-VUE® Envelope (3 5/8" x 8 5/8"). Made of opaque gray stock.

## continuous PAYROLL CHECKS with PAY STATEMENTS

**Maintains good employee relations** — Pay Statement and Pay Check given to employee as convenient unit. Space to spell out exact earnings, standard and special deductions.

**Low cost** — prices include printing your firm name and address, your bank's name and number, consecutive numbering and MICR encoding.

**Easy-to-use** — line up register marks on first check, all subsequent checks will be in exact registration.

**Software compatible** — Product 9000 designed for Apple Controller (GBS 1) and others. Product 9001 for Durango F-85 and others.

**Provides security** — Product 9000 check and pay statement preprinted with same consecutive numbers. Product 9001 only check is consecutively numbered.

**Product 9000 and 9001** — Size 8 1/2" x 7" detached. Check size 8 1/2" x 3 1/2". Prices include printing your heading, bank name and number, consecutive numbering and MICR encoding. Attractive blue fine line design on white stock. Available in continuous single sheets only.

QUANTITY	SINGLE Product 9000-1 or 9001-1	Product 775 DU-O-VUE® Envelopes
6,000	\$135.00	\$119.00
4,000	99.00	83.00
2,000	59.95	45.00
1,000	39.95	24.95
500	29.95	14.95
250	24.95	9.95

**It's convenient to order by mail, or if you wish, PHONE TOLL FREE 1 + 800-225-6380**  
(Mass. residents phone 1 + 800-252-9226)



NEW ENGLAND BUSINESS SERVICE, INC.  
NORTH MAIN ST., GROTON, MASS. 01450



ORIGINAL

INVOICE NO.

**YOUR FIRM NAME HERE**

123 Main Street  
YOUR TOWN, STATE and ZIP  
Phone 123-4567

INVOICE

SOLD TO:

SHIP TO:

ACCOUNT NO.	SALESMAN NO.	PURCHASE ORDER NO.	SHIP VIA	COL	PPD	DATE SHIPPED	TERMS	INVOICE DATE	PAGE

QTY. ORDERED	QTY. SHIPPED	QTY. BACK ORDERED	ITEM NO.	DESCRIPTION	UNIT PRICE	DISC. %	EXTENDED PRICE

PRODUCT 9041-2 / NES / Inc. Canton, Mass. 01450, To Order

**CONTINUOUS INVOICES**

Available in:

- 2 Part — Product 9041-2
- 3 Part — Product 9041-3
- 4 Part — Product 9041-4
- 5 Part — Product 9041-5

*Thank You*

SALE AMOUNT

MISC. CHARGES  
SALES TAX  
FREIGHT

**TOTAL**

PRINTED IN U.S.A.



**YOUR FIRM NAME HERE**

123 Main Street  
YOUR TOWN, STATE and ZIP  
Phone 123-4567

S

ST  
Item  
will a  
next

REFERENCE	DATE	CODE	DESCRIPTION
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**CONTINUOUS STATEMENTS**  
Available in:  
Single Part — Product 9061-1  
Duplicate — Product 9061-2

**CODES**

I - INVOICE	P - PAYMENT	F - FINANCE
C - CR MEMO	A - DISCOUNT	CHARGE
D - DR MEMO	ALLOWED	



To insure proper credit please check those items being paid in the "✓" column and return this portion of the statement with your payment.

Please refer to this account number when making inquiries.

STATEMENT DATE	ACCOUNT NO.

AMOUNT	BALANCE	REFERENCE	CODE	AMOUNT	✓

**TOTAL**

**YOUR FIRM NAME HERE**

PRINTED IN U.S.A.



A-1967-7179-A

**Phone 123-4567**

ACCOUNT NUMBER

RETURN THIS PORTION WITH PAYMENT

Use with PRODUCT 772 DU-O-VUE® Envelope — saves addressing time.

PRINTED IN USA

Thank You



YOUR FIRM NAME HERE

CHECK **Nº**

**1001**

HOURS		RATE	REGULAR EARNINGS	OVERTIME EARNINGS	OTHER PAY		GROSS	PERIOD ENDING
REGULAR	OVERTIME				UNITS	RATE		
								TOTAL GROSS
DEDUCTIONS								CONTROL NUMBER
F.I.C.A.	FED. W/H	STATE W/H	<b>CONTINUOUS PAYROLL CHECKS</b> Available in: Single Part — #9000-1					
							TOTAL DEDUCTIONS	
EMPLOYEE'S NAME AND SOC. SEC. NO.								NET PAY

A-2380-9/79-A

12105

Use with PRODUCT 775 DU-O-VUE® Envelope — Saves addressing time.

PRINTED IN USA

YOUR FIRM NAME HERE

123 MAIN STREET  
YOUR TOWN, STATE and ZIP

YOUR BANK NAME HERE  
CITY, STATE and ZIP

12-308  
1123

CHECK **Nº**

**1001**

PAY  
TO THE  
ORDER OF

DATE

CONTROL NO.

AMOUNT

**VOID**

AUTHORIZED SIGNATURE

⑆112303080⑆ 78 9123⑈



YOUR FIRM NAME HERE

CHECK

Nº

1001

OUR REF. NO.	YOUR INVOICE NO.	INVOICE DATE	INVOICE AMOUNT	AMOUNT PAID	DISCOUNT TAKEN	NET CHECK AMOUNT

**CONTINUOUS  
ALL-PURPOSE CHECKS**  
Available in:  
Single Part — Product 9021-1  
Duplicate — Product 9021-2

YOUR FIRM NAME HERE

123 MAIN STREET  
YOUR TOWN, STATE and ZIP

YOUR BANK NAME HERE  
CITY, STATE and ZIP

12-308  
1123

CHECK

Nº

1001

DATE

CONTROL NO.

AMOUNT

PAY  
TO THE  
ORDER OF

**VOID**

AUTHORIZED SIGNATURE

⑆112303080⑆ 78 9123⑈





**PHONE TOLL FREE**  
**1 + 800-255-6380**  
**(Mass. residents 1 + 800-252-9226)**

# Product 9021 CONTINUOUS ALL-PURPOSE CHECKS

NOTE: These forms and reference grids are shown 80% of full size.

Dotted area (not on forms) shows field for printing customer's name and address so it will show through the companion DU-O-VUE® envelope.

Perforated for easy detachment.

14 lines here for itemizing all transactions relative to this check.





# Product 9001 CONTINUOUS PAYROLL CHECKS

(Actual size is 9 1/2" x 7" overall)

NOTE: These forms and reference grids are shown 80% of full size.

YOUR FIRM NAME HERE										CHECK
EMPLOYEE NUMBER	HOURS				EARNINGS					
	REGULAR	OVERTIME	HOLIDAY	SPECIAL	REGULAR	VACATION	SICK			
SOCIAL SECURITY NUMBER	VACATION	SICK	TOTAL HOURS	OVERTIME	HOLIDAY	SPECIAL		GROSS PAY		
TAXES				DEDUCTIONS						
FICA	STATE WITH.	CITY WITH.	SAV. BOND	LOAN				TOTAL DEDUCTIONS		
FEDERAL WITH.	STATE	TOTAL TAXES	SAV. ACCT.					TOTAL DEDUCTED TAXES		
YEAR TO DATE							PAY PERIOD	NET PAY		
GROSS	FICA	FED. WITH. TAX	STATE WITH. TAX	STATE TAX	CITY WITH. TAX					
YOUR FIRM NAME HERE 123 MAIN STREET YOUR TOWN, STATE and ZIP										
YOUR BANK NAME HERE CITY, STATE and ZIP				DATE		CHECK No 1001				
12-308 1123						AMOUNT				
PAY TO THE ORDER OF				AUTHORIZED SIGNATURE						
1123030801 78 912311										

1

Specific headings are pre-printed to suit virtually all standard pay and/or deduction categories.

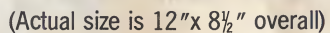
2

Perforated for easy detaching.

3

Dotted areas (not on forms) show imprint area and field for printing employees name and address so they will show through companion DU-O-VUE® envelopes.





NOTE: These forms and reference grids are shown 80% of actual size.

- 1 Dotted area (not on form) shows field for printing customer's name and address so it will show through companion window envelope.
- 2 Form perforated here so customer can return right side with payment.
- 3 Two lines here for account aging or a sales message.

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51

YOUR FIRM NAME HERE  
123 Main Street  
YOUR TOWN, STATE and ZIP  
Phone 123-4567

1

STATEMENT

STATEMENT DATEACCOUNT NO.

Items after this date  
will appear on your  
next statement.

Please refer to this  
account number when  
making inquiries.

To insure proper credit please check  
those items being paid in the "✓" column  
and return this portion of the  
statement with your payment.

STATEMENT DATEACCOUNT NO.

REFERENCE	DATE	CODE	DESCRIPTION	AMOUNT	BALANCE	REFERENCE	CODE	AMOUNT	✓
						2			
CODES I - INVOICE P - PAYMENT F - FINANCE C - CR MEMO A - DISCOUNT CHARGE D - DR MEMO ALLOWED						TOTAL			

3

YOUR FIRM NAME HERE





# Product 9041 CONTINUOUS INVOICES

(Actual size is 9½"x 11" overall)

NOTE: These forms and reference grids are shown 80% of full size.

ACCOUNT NO.	SALESMAN NO.	PURCHASE ORDER NO.	SHIP VIA	COL	PPD	DATE SHIPPED	TERMS	INVOICE DATE	PAGE
QTY. ORDERED	QTY. SHIPPED	QTY. BACK ORDERED	ITEM NO.	DESCRIPTION			UNIT PRICE	DISC. %	EXTENDED PRICE
							SALE AMOUNT		
							MISC. CHARGES		
							SALES TAX		
							FREIGHT		
							TOTAL		

**1**

**2**

Thank You

INVOICE

YOUR FIRM NAME HERE  
123 Main Street  
YOUR TOWN, STATE and ZIP  
Phone 123-4567

INVOICE NO.

SOLD TO:

SHIP TO:



**1** Dotted area (not on forms) shows field for printing customer's name and address so it will show through companion window envelope.

**2** Space here for additional terms or a sales message.